



CERTIFICATE OF MAILING

I hereby certify that this paper and every paper referred to therein as being enclosed is being deposited with the U.S. Postal Service as first class mail, postage prepaid, in an envelope addressed to: Mail Stop:Non-Fee Amendments, Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

27662

PATENT TRADEMARK OFFICE

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AUG 13 2003

Technology Center 2100

on August 7, 2003 (Date of Deposit)

Craig S. Fischer

PATENT

Microsoft Matter No.: 113952.01
Attorney Docket No.: MCS-011-98

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: KILGORE et al.

Serial No.: 09/148,615

Group Art Unit: 2171

Filed: September 4, 1998

Examiner: T. Chen

For: **SYSTEM AND METHOD FOR TRANSMITTING AND
DYNAMICALLY ADJUSTING DATA VALUES
ASSOCIATED WITH A REMOTE USER INPUT**

AMENDMENT UNDER 37 C.F.R. § 1.111

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Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated May 7, 2003, please amend the above-identified patent application as set forth below.

PTO
AUG 11 2003
PATENT & TRADEMARK OFFICE

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#24

TRANSMITTAL LETTER (Large Entity)		Docket No. MCS-011-98
Applicant(s): KILGORE et al.		

Serial No. 09/148,615	Filing Date September 4, 1998	Examiner T. Chen	Group Art Unit 2171
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Invention: **SYSTEM AND METHOD FOR TRANSMITTING AND DYNAMICALLY ADJUSTING DATA VALUES ASSOCIATED WITH A REMOTE USER INPUT**

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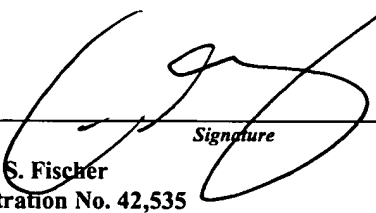
TO THE HON. COMMISSIONER FOR PATENTS: AUG 13 2003

Transmitted herewith is an amendment in the above-identified application. Technology Center 2100

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22 -	23 =	0 x	\$18.00	\$ 0.00
INDEP. CLAIMS	3 -	4 =	0 x	\$84.00	\$ 0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$ 0.00

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☐ A Credit Card Payment Form (PTO-2038) for payment for _____
in the amount of \$ _____ is attached.


Signature

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Dated: August 7, 2003

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Date of Deposit: August 7, 2003

By: Craig S. Fischer

Signature: 